# APPLICATION OF THE U.S. ARMY'S INTEGRATED PLANNING TO THE DEPARTMENT OF VETERANS AFFAIRS

A Monograph

by

Dr. Alexander Estrada

U.S. Department of Veterans Affairs


School of Advanced Military Studies
United States Army Command and General Staff College
Fort Leavenworth, Kansas

2014-01

# REPORT DOCUMENTATION PAGE

*Form Approved*
*OMB No. 0704-0188*



| 1. REPORT DATE *(DD-MM-YYYY)* | 2. REPORT TYPE | 3. DATES COVERED *(From - To)* |
|---|---|---|
| 22-05-2014 | Monograph | July 2013 – May 2014 |

**4. TITLE AND SUBTITLE**

Application of the U.S. Army's Integrated Planning to the Department of Veterans Affairs

**5a. CONTRACT NUMBER**

**5b. GRANT NUMBER**

**5c. PROGRAM ELEMENT NUMBER**

**6. AUTHOR(S)**
Estrada, Alexander

**5d. PROJECT NUMBER**

**5e. TASK NUMBER**

**5f. WORK UNIT NUMBER**

**7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES)**
U.S. Army Command and General Staff College
ATTN: ATZL-SWD-GD
100 Stimson Ave.
Ft. Leavenworth, KS 66027-2301

**8. PERFORMING ORGANIZATION REPORT NUMBER**

**9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES)**

**10. SPONSOR/MONITOR'S ACRONYM(S)**

**11. SPONSOR/MONITOR'S REPORT NUMBER(S)**

**12. DISTRIBUTION / AVAILABILITY STATEMENT**
Approved for public release; distribution is unlimited.

**13. SUPPLEMENTARY NOTES**

**14. ABSTRACT**

Integrated planning was designed to equip Army leaders with the ability to thoroughly understand problems and provide multiple logical solutions for problem resolution. Integrated planning is composed of a conceptual analysis component provided by the Army Design Methodology (ADM) as well as a detailed planning component, the Military Decision Making Process (MDMP). These complementary methodologies equip stakeholders with the information necessary to understand, visualize, and describe the environment and problem and then to formulate decisions and plans.

Can integrated planning be applied to administrative procedures in the healthcare delivery system, specifically at the Department of Veterans Affairs? This monograph provides the evidence which shows that integrated planning can be implemented at all levels within the Department of Veterans Affairs. Integrated planning should, at the very least, be added to the VA "toolkit" as an additional method to address complex, ambiguous problems encountered by the organization.

This monograph further explores the decision making process in organizations as well as the historical context of integrated planning. The basic fundamentals of integrated planning are introduced and described which leads into a discussion of the application of integrated planning within the VA. Examples of the applicability of integrated planning into the VA is performed by two hypothetical vignettes, both of which use a real life VA scenario as well as actual VA data. The first vignette reverse engineers a current VA action plan using integrated planning. The second vignette uses integrated planning to construct an alternate course of action for the same problem.

Also discussed in this monograph are the concepts of purposeful change, shared organizational values, and vision. This is done in order to address the idea that implementation of a new methodology into an organization requires VA stakeholders to be receptive to change. This receptiveness is achieved through shared understanding, vision, and identification with the organization's values and purpose.

This monograph suggests that integrated planning equips Army leaders with the ability to thoroughly understand problems and provide clear, concise options or logical solutions. This ability should not be limited to the military and can be readily applied to the Department of Veterans Affairs.

**15. SUBJECT TERMS**
ADM, MDMP, Integrated Planning,Institutional Change, Depaertment of Veterans Affairs

| 16. SECURITY CLASSIFICATION OF: | | | 17. LIMITATION OF ABSTRACT | 18. NUMBER OF PAGES | 19a. NAME OF RESPONSIBLE PERSON |
|---|---|---|---|---|---|
| a. REPORT | b. ABSTRACT | c. THIS PAGE | | 47 | 19b. TELEPHONE NUMBER *(include area code)* |
| UNCLASSIFIED | UNCLASSIFIED | UNCLASSFIED | | | |

MONOGRAPH APPROVAL

Name of Candidate: Dr. Alexander Estrada

Monograph Title: Application of the U.S. Army's Integrated Planning to the Department of Veteran Affairs

Approved by:

_____, Monograph Director
Gerald S. Gorman, Ph.D.

_____, Seminar Leader
Michael J. Swanson, COL., AV

_____, Director, School of Advanced Military Studies
Henry A. Arnold III, COL, IN

Accepted this 22nd day of May 2014 by:

_____, Director, Graduate Degree Programs
Robert F. Baumann, Ph.D.

ABSTRACT

APPLICATION OF THE U.S. ARMY'S INTEGRATED PLANNING TO THE DEPARTMENT OF VETERANS AFFAIRS, by Dr. Alexander Estrada, Veterans Health Administration, U.S. Department of Veterans Affairs, 47 pages.

Integrated planning was designed to equip Army leaders with the ability to thoroughly understand problems and provide multiple logical solutions for problem resolution. Integrated planning is composed of a conceptual analysis component provided by the Army Design Methodology (ADM) as well as a detailed planning component, the Military Decision Making Process (MDMP). These complementary methodologies equip stakeholders with the information necessary to understand, visualize, and describe the environment and problem and then to formulate decisions and plans.

Can integrated planning be applied to administrative procedures in the healthcare delivery system, specifically at the Department of Veterans Affairs? This monograph provides the evidence which shows that integrated planning can be implemented at all levels within the Department of Veterans Affairs. Integrated planning should, at the very least, be added to the VA "toolkit" as an additional method to address complex, ambiguous problems encountered by the organization.

This monograph further explores the decision making process in organizations as well as the historical context of integrated planning. The basic fundamentals of integrated planning are introduced and described which leads into a discussion of the application of integrated planning within the VA. Examples of the applicability of integrated planning into the VA is performed by two hypothetical vignettes, both of which use a real life VA scenario as well as actual VA data. The first vignette reverse engineers a current VA action plan using integrated planning. The second vignette uses integrated planning to construct an alternate course of action for the same problem.

Also discussed in this monograph are the concepts of purposeful change, shared organizational values, and vision. This is done in order to address the idea that implementation of a new methodology into an organization requires VA stakeholders to be receptive to change. This receptiveness is achieved through shared understanding, vision, and identification with the organization's values and purpose.

This monograph suggests that integrated planning equips Army leaders with the ability to thoroughly understand problems and provide clear, concise options or logical solutions. This ability should not be limited to the military and can be readily applied to the Department of Veterans Affairs.

TABLE OF CONTENTS

ACRONYMS

| | |
|---|---|
| ADM | Army Design Methodology |
| ADP | Army Doctrinal Publication |
| ADRP | Army Doctrinal Reference Publication |
| CARL | Combined Arms Research Library |
| CEO | Chief Executive Officer |
| CGSC | U.S. Army Command and General Staff College |
| COA | Course of Action |
| COG | Center of Gravity |
| DBQ | Disability Benefits Questionnaire |
| DoD | Department of Defense |
| DVA, VA | U.S. Department of Veterans Affairs |
| FDC | Fully Developed Claim |
| FM | Field Manual |
| MA | Mission Analysis |
| MMAS | Master of Military Art and Science |
| MDMP | Military Decision Making Process |
| SOP | Standard Operating Procedure |
| SAMS | School of Advanced Military Studies |
| VBA | Veterans Benefit Administration |
| VBMS | Veterans Benefit Management System |
| VHA | Veterans Health Administration |

ILLUSTRATIONS

# INTRODUCTION

This monograph explores decision making processes across organizations and introduces the U.S. Army's concept of 'integrated planning' to the Department of Veterans Affairs (VA). The purpose is not to be critical of the Department of Veterans Affairs, or any other institution, but to understand these institutions better. More importantly, this monograph serves to evaluate the applicability of the two components of integrated planning, Army Design Methodology (ADM) and the Military Decision Making Process (MDMP), outside of the military. The target audience is leadership and management, as well as organizational stakeholders across both public and governmental entities. Can integrated planning be applied to administrative procedures in the healthcare delivery system, specifically at the Department of Veterans Affairs? This monograph examines how the conceptual problem analysis provided by ADM and the detailed planning provided by each of the steps of the MDMP can be used to expose inefficiencies in healthcare management and delivery as well as propose options for reduction in bureaucracy and encourage efficiency. The model of organization and problem solving provided by integrated planning could be transferred and applied to the Department of Veterans Affairs to better achieve its mission.

ADP 5-0, *The Operations Process*, describes ADM as "A methodology for applying critical and creative thinking to understand, visualize, and describe unfamiliar problems and approaches to solving them.[1] This same doctrinal publication defines the MDMP as "An iterative planning methodology to understand the situation and mission, develop a course of action, and produce an operation plan or order."[2] ADM provides the conceptual framework for the analysis of a problem. This equips the planning staff with the necessary understanding of the problem

[1]Department of the Army, ADP 5-0 *The Operations Process* (Washington, DC: Department of the Army, May 2012), 7.

[2]Ibid., 8

allowing for visualization of an approach to generate solutions. This framing of the environment as well as the problem understanding allows the planning staff to then enter the MDMP which provides the framework for detailed planning. The MDMP is not a strict set of rules, but a process with flexibility built into it. The MDMP consists of seven steps which serve to both further clarify the situation as well as develop options for resolution of problems, all while encouraging interaction between team members. These options allow for detailed planning, resulting in executable plans and orders.

The integrated planning construct was designed to equip Army leaders with the ability to thoroughly understand problems and provide clear, concise options or logical solutions. Integrated planning, by its nature, fosters clarity and efficiency as well as allows for collaborative work throughout all levels of the organization.

Integrated planning can be implemented at all levels within the Department of Veterans Affairs, but this requires staff to be open to new concepts and adoption of this new planning process by the agency. Many of those in leadership positions will attest to the fact that one of the most difficult tasks in organizations is the implementation of change. Change requires work; it requires VA stakeholders to change their behaviors in order to be adaptable and to be open to taking risks. Change from the status quo, adaptability, and risk taking are unpleasant concepts for individuals to engage. In order to be successful, VA stakeholders need to accept risk. Organization wide, VA employees must get past the trepidation often sensed regarding whether or not the change will be as good as the previous activity or better, or even the possibility that it will be worse. As Gordon Sullivan and Michael Harper note, “It is possible to transform any

organization so that creative, adaptive behavior becomes imbedded in its culture, so that it can be successful in a future that cannot be predicted."[3]

The inherent resistance to change impairing adaptable behavior needs to be understood by those in leadership in order to evaluate why certain behaviors and decision paradigms remain in effect when often by logical standards, they should have been discarded long ago. It is not uncommon for individuals and organizations to recognize the need for change and yet change is not implemented.[4] The greatest challenge is not only implementing a change in decision-making structure, but also a willingness in individuals to accept this change.

The common values of all of the stakeholders involved (the organization and all of its members) are instrumental in handling the often unpleasant sensation of instability associated with change. The VA must reinforce common values in order to encourage stability; stability will in turn will encourage direction, which in turn will help implement change. As Sullivan and Harper note, "Values give an organization a self-ordering quality, a kind of organizational ballast which provides direction and stability in periods of turmoil, stress, and change."[5]

The VA is not immune to this resistance to change. Overcoming this resistance is especially difficult in an organization which has long adhered to a 'militaryesque' hierarchical leadership, as well as a reliance on standard operating procedures (SOPs). One must keep this in mind when studying potential paradigm shifts in the institutional decision making process of the Department of Veterans Affairs. Change of habits and an inherent change in culture may be

---

[3]Gordon R. Sullivan and Michael V. Harper, *Hope Is Not a Method: What Business Leaders Can Learn from America's Army*, 1st ed. (New York: Crown Business, 1997), 254.

[4]Nancy M. Lorenzi and Robert T. Riley, "Managing Change An Overview," *Journal of the American Medical Informatics Association* 7, no. 2 (March-April 2000): 1, http://www.ncbi.nlm.nih.gov/pmc/articles/PMC61464/ (accessed April 17, 2014).

[5]Sullivan and Harper, 86

necessary for these concepts to gain traction within the organization and culminate in positive change.

This monograph discusses the history and evolution of the Army's planning processes for the civilian layperson. The monograph provides evidence supporting the applicability of this military planning and design process into the civilian sector at the Department of Veterans Affairs. Furthermore, the monograph provides discussion regarding decision making as a concept and the importance of having organized decision making paradigms within organizations. As examples of the applicability of Army design processes to the VA, this monograph presents two hypothetical vignettes for demonstrative purposes. One is based on how integrated planning could hypothetically have been used to solve a problem for which the VA already has a working strategy. The second vignette applies integrated planning towards the development of another hypothetical alternate course of action in order to resolve the same issue. No new decision making and planning construct can be introduced into the VA without a discussion of purposeful change in institutions, and this is what the last section of this monograph accomplishes.

## DECISION MAKING

Depending on what is being "decided" by those in leadership, decisions can be difficult to make. What is often difficult is making that which is considered to be the "right" decision. Sometimes, there is no "right" decision, but only the best decision available given the specifics of the problem scenario. The difficulty some people find in decision making is fear of the repercussions of their decision. Another factor may be a fear of ambiguity in the information provided to them about the given problem or the data pertaining to the situation.[6] These factors are all exacerbated as problems grow in complexity.

[6]James G. March, *Primer On Decision Making: How Decisions Happen* (New York: Free Press, 2009), 178-180.

As one can see, problems and decisions are recurrent and underlying themes. Before decisions can be made and solutions can be designed, the problem needs to understood by all of the stakeholders (decision makers and planning staffs). As Yaneer Bar-Yam states in his book *Making Things Work: Solving Complex Problems in a Complex World*, "There is no one way to solve all complex problems. In management terminology, there are no 'best practices' that apply to all cases. The solution to the problem has to be related to the type or structure of the particular problem."[7] It is this shared understanding of the dynamics of a problem which enables the stakeholders to make educated planning decisions. As the stakeholders begin to understand problems, they naturally begin to process possible solutions. These solutions feed back into a deeper understanding of the problem. As Conklin notes, "Indeed, the problem often can best be described in terms of solution elements."[8]

## Decision Making and Integrated Planning

The Army's integrated planning concept addresses the factors discussed above by inspiring confidence in the decision maker that the problem was accurately understood, assessed, and analyzed by a collective planning staff. The components of integrated planning encourage a robust analytical process that encourages buy in from all stakeholders which allows for the production and comparison of multiple courses of action, dispelling any ambiguity which may have been present. Ambiguity should not be seen as a constraint, but as an opportunity to seize the initiative and create a strategy for success. The challenge of ambiguity is to be embraced instead of seen as a point of frustration.[9] Furthermore, by providing a number of explored

---

[7]Yaneer Bar-Yam, *Making Things Work: Solving Complex Problems in a Complex World* (Cambridge, MA: NECSI, Knowledge Press, 2004), 15.

[8]E. Jeffrey Conklin, *Dialogue Mapping: Building Shared Understanding of Wicked Problems* (Chichester, England: Wiley, 2006), 4-5.

[9]March, *Primer On Decision Making: How Decisions Happen,* 260

options, integrated planning allows for the selection of the course of action best suited to a problem.

The U.S. Army employs three techniques for planning: Army Design Methodology (ADM), the Military Decision Making Process (MDMP), and Troop Leading Procedures. ADM and MDMP together make up what is referred to as “integrated planning”. Per Army doctrine, ADM helps to frame problems as well as their environment and leads to the development of operational approaches to solve these problems.[10] ADM also generates a commander’s intent for the intended mission. The products of ADM are conceptual and empower the collective staff to understand the general situation from a broad perspective. These all create a theoretical bridge between conceptual and detailed planning. The conceptual nature of Army Design Methodology liberates the stakeholders to explore creative options for problem resolution. The MDMP then allows for detailed planning and expands the decision-makers mind to think, assess, and act on the greater picture. Figure 1 serves to illustrate this “integrated planning” concept.

This monograph explores how integrated planning will be useful for solving emergent issues at the Department of Veterans Affairs. It is human nature to make decisions in "crisis mode" and that people often think of solutions to current problems in their present state and not look for root causes of problems or look at long term effects of both problems and choices. By looking through the lens of the Army’s integrated planning, the VA will be able to better understand problems and develop appropriate and sustainable system operations both for the near as well as long term.

[10]Department of the Army, ADP 5-0 *The Operations Process* , 7

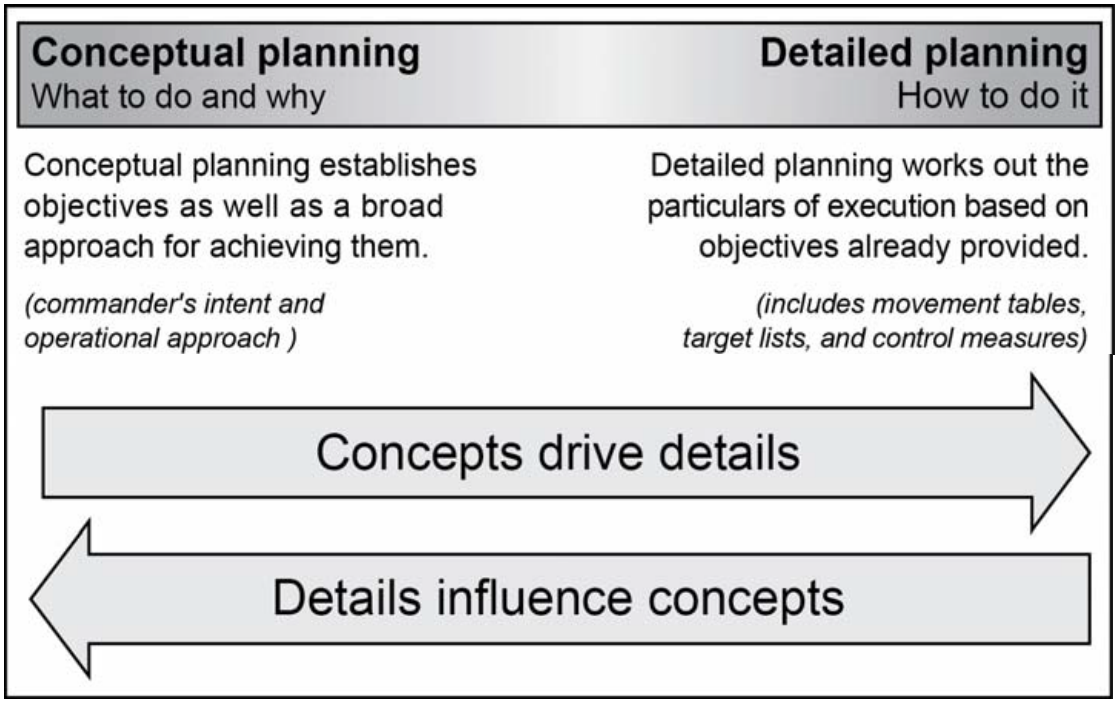


Figure 1. Integrated Planning.

*Source*: Department of the Army, ADRP 5-0 *The Operations Process* (Washington, DC: Department of the Army, May 2012), 2-3.

## WHAT IS INTEGRATED PLANNING?

The decision making and planning process for the military has been an evolving concept whose origins go back to the beginning of the 19th century. Arguably, military decision making did not truly become a science until the 19th century and is most notably documented by Carl von Clausewitz and Antoine-Henri Jomini.[11] Over the decades, the United States Army has published doctrinal products with the purpose of providing guidance to its officers for making plans and developing orders. These processes evolved and came into full maturity in the U.S. Army

[11]Christopher Otero, "Reflections On Clausewitz and Jomini: A Discussion On Theory, MDMP, and Design in the Post OIF Army," *Small Wars Journal* (May 25, 2011): 1-2, http://smallwarsjournal.com/blog/journal/docs-temp/772-otero.pdf (accessed April 3, 2014).

publication of Field Manual 5-0 in 2010 where a refined planning process is discussed in depth.[12] An MDMP-like process was first described in the 1932 FM 101-5 *Staff Officers' Field Manual, Part I* and was referred to as "Estimate the Mission." This process consisted of five steps:[13]

Mission: that mission assigned by higher headquarters

Opposing Forces: the disposition and relative combat strength of the enemy

Enemy Situation: analysis of the enemy's probable intentions

Own Situation: analysis of the available friendly courses of action

Decision: states what is to be accomplished, when, where, and why.

Another example of an evolved early iteration of the MDMP can be found in the 1940 FM 101-5 *Staff Officers' Field Manual and the Staff and Combat Orders*. Here, the decision making process is composed of five steps (as compared to the current MDMP having seven steps).[14] The five steps of the 1940 decision making plan are:

Estimate the decision.

Decide on action to meet the situation.

Develop a plan to put the decision into effect.

Orders production.

Ensure conduct of the operation in accordance to the orders.

---

[12]Department of the Army, ADP 5-0, 8-9

[13]Department of War, FM 101-5 *Staff Officers' Field Manual, Part I* (Washington, DC: Department of War, August 1932), 44-46.

[14]Department of War, FM 101-5 *Staff Officers' Field Manual and the Staff and Combat Orders* (Washington, DC: Department of War, August 1940), 36-40.

The current MDMP employs an analytical approach to examining a situation (problem), developing and comparing courses of action, and eliciting a commander's (executive director's) decision in order to produce an operation order.[15] The MDMP encourages collaborations at multiple levels of leadership and allows for information sharing as well as parallel planning. The MDMP is composed of seven steps[16]:

Step 1 – Receipt of mission.

Step 2 – Mission analysis.

Step 3 – Course of action development.

Step 4 – Course of action analysis.

Step 5 – Course of action comparison.

Step 6 – Course of action approval.

Step 7 – Orders production, dissemination, and transition.

These seven steps are generally performed sequentially, but can be repeated as necessary when or if conditions change.

The Army Design Methodology describes the current state as well as the desired state for a certain situation and frames the problem. In turn the staff develops a conceptual operational approach to solve this problem(s).[17] For each mission, the planning staff must "frame the problem" thereby enabling them to fully understand the issues at hand as well as the environment

---

[15]John J. Marr, "The Military Decision Making Process: Making Better Decisions Versus Making Decisions Better" (Monograph, School of Advanced Military Studies, Fort Leavenworth, KS, 2000-2001), 4.

[16]Department of the Army, ADP 5-0, 8

[17]Ibid., 7-8

in which they exist. Problem framing is a critical component to decision-making methodology since it allows planners to extract the variables, the pieces of the puzzle, of the problem being working through. Problem framing may seem instinctual, but this instinct needs to be harnessed as an important, formal tool, necessary for the dissection and understanding of a problem.

As illustrated in figure 2, understanding of the current state (problem) in conjunction with the identification of the desired end state (resolution), is what allows for proper problem framing and, ultimately, the development of an operational approach which leads to the design of a plan to achieve that outcome.

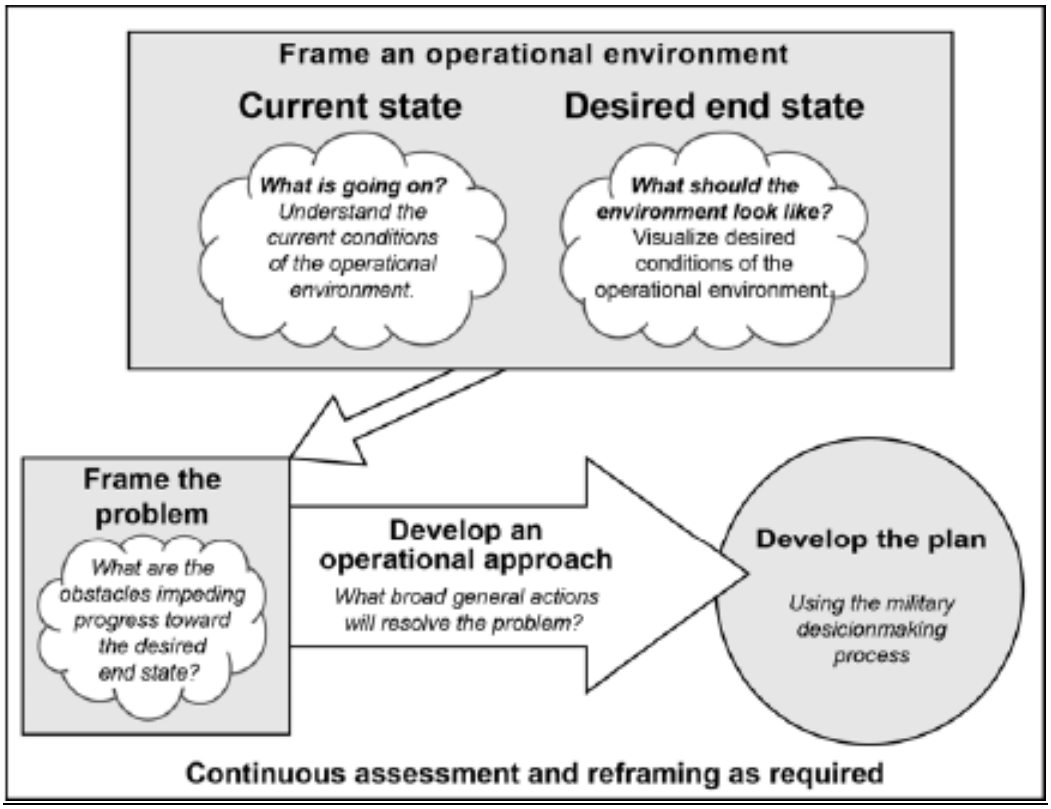


Figure 2: Army Design Methodology

*Source*: Department of the Army, ADRP 5-0 *The Operations Process* (Washington, DC: Department of the Army, May 2012), 2-6.

Using the products of the ADM, the planning staff can enter the initial step of the MDMP known as "receipt of the mission." Here, the commander provides his initial guidance and staff compiles running estimates of resources and shortfalls. In this step, it is essential for the commander to clearly lay out key tasks and desired end states in his initial guidance. Running estimates (provided by the staff) are continuous throughout the process and consist of continuous assessment of the current situation. These estimates are used by the commander and staff to determine if the current operation is proceeding according to the commander's intent and if planned future operations are supportable.[18] The commander's intent is a clear, concise statement of what the force must do to succeed with respect to the enemy and the terrain, and the desired end state. It provides the link between the mission and the concept of operations by stating the key tasks that, along with the mission, are the basis for subordinates to exercise initiative when unanticipated opportunities arise or when the original concept of operations no longer applies. The staff further prepares gathered information for the next step in the process, Mission Analysis.

Next, as the name implies, the Mission Analysis step serves to take a close look at what the mission goals are, what resources are available to meet said goals, and what impediments there may be to reach the desired goals. During the Mission Analysis (MA) step of the MDMP, the staff refines the commander's guidance and its components are clearly laid out. Using this as a baseline, specified, implied, and essential tasks are identified by the planning staff. Specified tasks are explicit in the commander's guidance. Implied tasks are things which need to be accomplished in order for mission success, but are not explicitly in orders or guidance. As the name implies, essential tasks, are those which are mission critical and must be done in order to achieve the desired end state. The staff identifies task organization and assets as well as

[18]Ibid., 14-15

restrictions and constraints are assessed and exposed. Finally, the staff identifies risks as well as critical facts and assumptions.

A critical activity during the Mission Analysis step of the MDMP is the identification of a “Center of Gravity” (COG) for both enemy and friendly forces. The COG is defined as "The source of power that provides moral or physical strength, freedom of action, or will to act."[19] In other words, a COG is a construct (physical or theoretical) which is the key to any organization or entity. Proper identification and addressing of the COG, or the failure to, will ultimately contribute to either the success or the failure of the operation. The COG is key to Mission Analysis. For example, in the military, a COG may be a country’s army, economy, or infrastructure.[20] In healthcare, a COG may be access to care, quality of care, or the availability of facilities or technologies. Joseph Strange and Richard Iron further refer to problems as having “dominant characteristics;” it is these dominant characteristics which are often identified later on as a COG.[21]

The third step in the MDMP is the Course of Action Development phase. This is the creative step of the MDMP. Using information from the mission analysis, the staff assesses “relative combat power” and synthesizes options utilizing the available guidance and information. Subsequently, the staff generates course of action statements as well as sketches. Typically three to four courses of action are generated by the planning staff. More can be conceived, but usually these are distilled into those which are most suitable, feasible, acceptable, distinguishable, and

---

[19]Department of Defense, Joint Publication 1-02 *Department of Defense Dictionary of Military and Associated Terms* (Washington, DC: Department of Defense, November 2010), 33.

[20]Carl von Clausewitz, trans., *On War, Indexed Edition*, Reprint ed., trans. Michael Howard and Peter Paret (Princeton, NJ: Princeton University Press, 1989), 595-96.

[21]Joseph L. Strange and Richard Iron, “Center of Gravity What Clausewtiz Really Meant,” *Joint Forces Quarterly* no. 35 (Summer 2003): 22-23, http://www.dtic.mil/dtic/tr/fulltext/u2/a520980.pdf (accessed April 15, 2014).

complete.[22] Each course of action must be suitable for the completion of the mission, feasible with the resources and assets available, acceptable to current standards, distinguishable for each other (unique), and complete in achieving the desired end state (goal).

Fourth in the MDMP is the Course of Action (COA) Analysis, also known as "wargaming." Here the staff reviews and studies the different courses of action in depth. This step functions to provide an independent, in-depth evaluation of each course of action. The planning staff needs to gather the tools (both physical and theoretical), list all friendly forces, list assumptions, list known critical events and decision points, determine evaluation criteria, select the war game method, select a method to record and display results (ex. via synchronization matrix or sketch note), and finally war game the battle and assess the results for each course of action.

Before wargaming is even initiated, it is important for the planning staff to have established fair and unbiased course of action evaluation criteria. Developing these criteria during mission analysis or as early as possible in the process reduces collective staff bias towards one COA or another and ensures fair wargaming as well as COA comparison down the road.[23] These criteria do not change and ensure that the comparison of any developed COAs is fair and objective in nature.

Wargaming is conducted by via one of three established methods: "belt," "avenue in depth," and "box." The "belt" method divides the COA by events, objectives, or events and objectives in a selected slice across all lines of effort.[24] Each "belt" is represented by different objectives for each line of effort. Once every objective is accomplished for each line of effort, one

---

[22]Department of the Army, FM 101-5 *Staff Organization and Operations* (Washington, DC: Department of the Army, May 1997), 5-11.

[23]Department of the Army, ATTP 5-0.1 *Commander and Staff Officer Guide* (Washington, DC: Department of the Army, September 2011), 4-14.

[24]Ibid., 4-28

moves on to the next belt. This repeats sequentially until the desired end state is achieved. The "avenue in depth" method of wargaming generally applies to offensive operations and is focused on one geographic avenue of approach at a time. This method of analysis assesses each line of effort in depth along phased points or lines on a map or sketch.[25] Another way this method is useful is that it allows one to see the relationship of each line of effort to each other. Finally, the "box" method of wargaming focuses analysis on a specific objective along a line of effort.

Wargaming is an unbiased evaluation of each COA and lists the advantages and disadvantages of each COA along constant evaluation criteria. The wargaming results reveal benefits and drawbacks for each course of action contemplated and lead to modification of the courses of action, as well as provide information pertinent to both the friendly and enemy forces in each given course of action scenario. This may include a comparison of hazard probability (frequent, probable, occasional, remote, or improbable) with hazard severity (catastrophic, critical, marginal, and negligible). The stage is now set for the next step, the Course of Action Comparison.

In the Course of Action Comparison step, as the name implies, each course of action is compared against the others using the previously established. A "decision matrix," as illustrated in figure 3, can be used to compare the advantages and disadvantages of each course of action. The staff examines all the pertinent information and prepares a recommendation which is to be presented to the commanding officer. This leads to course of action approval.

[25]George Hodge, "Wargaming Courses of Action During Other-than-major Combat Operations," *Small Wars Journal* (June 22, 2012): 1, http://smallwarsjournal.com/jrnl/art/wargaming-courses-of-action-during-other-than-major-combat-operations (accessed March 30, 2014).

| COA | 1 | 2 |
|---|---|---|
| Advantages | -Cost effective<br>-Rapid effect | -Politically popular<br>-Low casualty rate |
| Disadvantages | -High casualty rate<br>-Not politically popular | -Expensive<br>-Slow to implement. |

Figure 3: Sample Decision Matrix

*Source*: Created by Author

The final event which must occur is that of formal orders production and issuance. Upon approval of a course of action by the commanding officer is obtained, the staff then issues a warning order to the subordinate staff, sets a "high value" target list, prepares a refined commander's intent, and finally rehearses the intended course of action. The key here is to maintain coordination and flexibility. Also critical in this step is clear, concise mission and intent statements which come out of centralized planning and allow for decentralized execution as well as synchronization of effort. The planning staff has to make efficient use of existing resources. Timeliness is critical throughout this process. The order produced also needs to allow for branches and sequels as well as control measures. Branches are contingency plans which are drawn up in the event the mission needs to be changed should unanticipated actions take place. Sequels are future operations which need to occur after the mission is complete.[26]

It may appear as though the MDMP would be difficult to apply outside of the military, but it is actually less complicated than it seems and can be applied to a variety of situations. The

[26]Department of the Army, FM 5-0 Army Planning and Orders Production (Washington, DC: Department of the Army, January 2005), 1-66-68.

MDMP is effective at providing options to resolve problems of varied complexity involving ambiguity of varying depths.

## INTEGRATION AND APPLICATION OF INTEGRATED PLANNING INTO THE DEPARTMENT OF VETERANS AFFAIRS

The terminology of ADM and MDMP may not be immediately understood by those not in the military, but the concepts contained therein are universal. Application of integrated planning into health care as well as other settings can be very useful for the promotion of efficiency as well as for the genesis of novel solutions to organizational problems. The following discusses the application of various concepts from integrating planning and will demonstrate how these concepts can be applied outside of the military.

Regardless of the setting, the VA staff can use the Army Design Methodology to visualize, describe, and assess the problem as well as the current state. Figure 2 illustrates how the ADM describes the desired end state (goal) and frames the problem along with an operational approach from which to develop a plan. After framing the problem and developing an operational approach, the VA planning staff can enter the MDMP.

Entering the MDMP, one can take for example the concept of “mission receipt” in the VA setting where the commander (Chief of Staff, decision maker, supervisor, etc.) provides the mission to his staff (planning staff, subordinate staff, employees of the organization). Included in the mission would be his initial guidance for how he thinks this task should be addressed as well as a tentative deadline for completion.

The VA staff next conducts a “mission analysis” to identify explicit and implicit tasks, performs an evaluation of the resources available to accomplish the mission, lists assumptions, evaluate environmental factors affecting the mission, and scrutinizes civil (political) considerations. From these variables, VA staff composes a “problem statement” and a “mission statement” as well as synthetizes a “commander’s intent” and initial guidance.

The staff must also identify the Center(s) of Gravity. As previously defined, the center of gravity is the key difficulty underlying every problem. In developing a course of action, the COG is that one element in a system which, when affected, will have the greatest effect on that system.[27] For example, in health care (the VA especially), one of the biggest problems is access to care, which could be considered a COG. Centers of gravity could be identified as leadership, available medical personnel, technology, space, or other factors. Selection of the COG may be difficult, but its identification is essential. Joseph L. Strange postulated that COGs can be identified by assessing what the critical capabilities, critical requirements, and critical vulnerabilities are for a proposed COG. For our purposes, only the first two apply: critical capabilities and critical requirements. Critical capabilities are the abilities which allow a center of gravity to function and to be identified. Critical requirements are those essential conditions, resources and means that sustain effective critical capabilities.[28] By identifying these, the VA staff is able to properly identify the COG. Regarding Course of Action (COA) development, multiple courses of action are synthesized by the VA planning staff using the products from the mission analysis. Each course of action must specify how that it will accomplish the mission (who, what, where, and when); the mission is the "why."

When developing courses of action, the VA staff needs to designate task organization as well as develop a concept of operations. VA planning staff must generate COAs which are suitable, feasible, acceptable, unique to each other, and complete. In other words, the COAs developed by the staff meet suitability criteria which fit VA policy & procedures as well as be acceptable to federal standards. Completeness and uniqueness to each other is a must.

---

[27]Joseph L. Strange and Richard Iron, "Center of Gravity What Clausewtiz Really Meant," *Joint Forces Quarterly* no. 35 (Summer 2003): 22-23, http://www.dtic.mil/dtic/tr/fulltext/u2/a520980.pdf (accessed April 15, 2014).

[28]Joseph L. Strange, "Centers of Gravity and Critical Vulnerabilities: Building On the Clausewitzian Foundation so That We Can All Speak the Same Language," *Marine Corps University Perspectives on Warfighting* 4, no. 2 (1996): 43.

Throughout the process, the VA planning staff must continue to update assumptions and apply any subsequent guidance from the decision maker.

The VA planning staff needs to ensure the COG is identified, as addressing this will achieve the most efficient achievement of the desired end state.[29] If the COG is identified as "access to care," the staff needs to include this in their operational approach so that the COA developed will address this issue. Similarly, for example, if the staff has identified the COG as being an issue with not enough available resources, then the COA development needs to take this factor into account and make most efficient use of the available assets, or recruit resources from the outside in order to meet the needs for achievement of the desired end state.

Another concept to consider in this phase of planning is that of joint operations. In the military, joint operations employ forces across different domains (ex. air, sea, land, cyber). These forces must act in synchronization in order to achieve the objective. In the civilian workplace, the land domain may be the physical environment or the space allocated for a clinic. The air domain may be representative of the organization's marketing campaign. The cyber domain may be representative of the organization's technological capability. Thinking about initiatives in terms of joint operations helps ensure that leaders exploit valuable opportunities as well as identify critical vulnerabilities. These concepts are important to the planning process since the different domains represent both mission variables as well as media which could be exploited for the benefit of mission accomplishment. Synchronization of efforts allows for greater and more efficient impact on the mission.

When looking into course of action analysis as well as comparison later on, the civilian organization must evaluate each COA for risks and benefits that might not be immediately relevant in the military realm. Examples of some of these factors may be the cost, safety, and

[29]Strange and Iron, "Center of Gravity What Clausewtiz Really Meant"

efficacy of proposed COAs. As previously discussed, a "decision matrix" can be used to compare COAs.

The Course of Action Analysis (wargaming) step which follows, again applies any updated estimates and assumptions and produces refined COAs, identifies decision points for the commander (decision maker) as well as any further updated assumptions. Decision points are predetermined points in the plan of anticipated events where the commander needs to provide input to the planning staff in order to maintain the initiative and be able to move forward in the operation. Decision points may be associated with VA assets, the status of ongoing operations, or with information the commander needs to make the anticipated decision.[30]

Each course of action is thought through and analyzed independently by the VA staff using one of the wargaming methods previously discussed. This is critical so as to keep the results as objective as possible. During COA analysis, the VA planning staff scrutinizes things such as cost, manpower needs, time, and other resources. For example, a particular COA may be low in cost, but slow to implement. Conversely, a COA may be swift to implement, but requires large manpower needs and therefore increased cost. The VA greatly benefits by having multiple courses of action and visualizing what goes into each option and how each option achieves the desired end state. This process in and of itself encourages efficiency due to the elimination of processes identified as wasteful or inefficient. The subsequent section of this monograph will provide examples of this utilizing hypothetical vignettes.

Using the products and data from the COA analysis, the VA staff then compares the courses of action against each other objectively. A standard method of evaluation should be used in order to maintain the validity and fairness of the comparison. When comparing COAs, the VA planning staff must evaluate the same parameters in each

[30]Department of the Army, ATTP 5-0.1, 4-27

separate COA; this ensures an “apples to apples” comparison. Appropriate comparison parameters in the civilian sector could be things like cost, time to implement, and manpower requirements. Each refined COA, with an updated set of assumptions and running estimates, is compared side by side and briefed to the decision maker. Once a COA has been selected and approved by leadership, it is modified as necessary as per guidance from the decision maker as well as to ensure completion of the desired task or achievement of the end state.

Finally, the VA planning staff again reviews assumptions and running estimates before orders are produced and disseminated for the course of action the organization will follow. Civilian organizations, and especially health care, do not use “orders” in the military sense but nonetheless use documents for policy, instruction and direction. Therefore, the orders production step of the MDMP would correspond to the production of the guidance document specific to that organization (ex. an SOP or a policy).


Figure 4: MDMP modified for the VA

*Source*: Created by Author

## VINGETTES

This section of the monograph reveals how the components of integrated planning (ADM and MDMP) can be applied to the VA using two hypothetical examples. One vignette shows how a plan currently in place at the VA could have been synthesized using integrated planning up through the end of the "COA development" step of the MDMP. The second vignette demonstrates integrated planning in action and develops an alternate course of action for the same scenario hypothetical using real VA data. These two hypothetical COAs will be compared at the end of the second vignette.

### Vignette #1: How Integrated Planning can be used to reduce the VA benefits claims backlog.

The Department of Veterans Affairs already has a robust plan in place for reducing the disability claims backlog the organization has been experiencing. This vignette will reverse engineer the course of action the VA already has in place and demonstrate how integrated planning could have been used to develop this COA. According to VA protocols, claims (new or old) which have been pending for more than 125 days are considered as "backlog."[31] Per VA statistics, 68% of these claims are from veterans claiming supplemental additional benefits and 32% are new claims (figure 3). As of March 2014, over three hundred and sixty eight thousand claims were in backlog.[32] Again, the following hypothetical applies integrated planning to this problem using information from the strategic plan already in place to demonstrate how integrated planning could have come up with the course of action. In "Vignette #2," the monograph uses the same mission statement, problem statement, and data set to develop an alternate course of action to reach the same desired end state using integrated planning.

---

[31]United States Department of Veterans Affairs, "*2013 Monday Morning Workload Reports*" March 8, 2014, http://www.vba.va.gov/reports/mmwr (accessed March 8, 2014).

[32]Ibid.

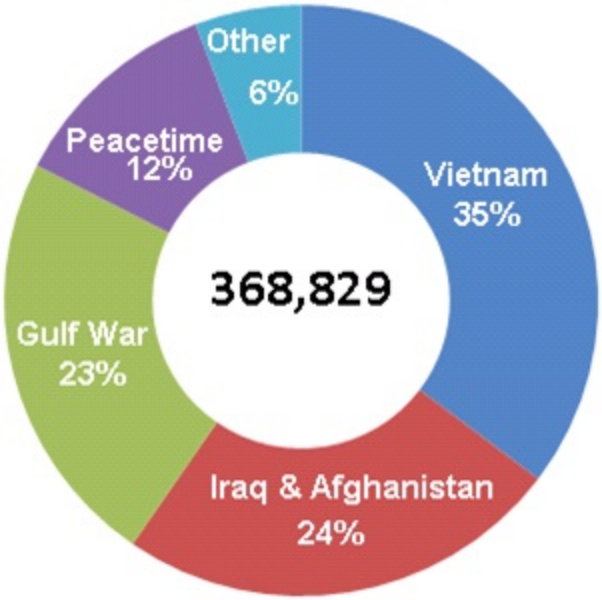


Figure 5: VA Claims Backlog Composition

*Source*: United States Department of Veterans Affairs, *"2014 Monday Morning Workload Reports,"* March 8, 2014, http://www.vba.va.gov/reports/mmwr (accessed March 8, 2014).

Given the scenario, the VA would like to have a system in place where there would be a zero claims backlog. In doctrinal terms, the desired "end state" is to have zero backlogged claims where all claims would be successfully processed within 125 days. This would mean that the system which handles these claims would run in such a manner that efficiency and timely processing would improve without a negative effect on the quality of the services.

The first step in integrated planning is conceptual analysis. In analyzing this situation, and "framing the problem," the VA staff understood and visualized the current state / situation as well as the desired end state. The VA planning staff then framed the problem and concluded it to be related to issues pertaining to the processing of disability claims. In applying the Army Design Methodology, in retrospect, one can see by the VA's course of action as well as by the problem framing that they identified that the Center of Gravity of this problem was internal to the organization. This is evident in that the VA staff identified the "organization" as the COG since

they chose to address the problem (by the design of their course of action) through the modification and addition of internal processes. Subsequently, the VA staff established that the operational approach would be by utilizing improved personnel performance, business process improvements and technology.[33] Again, the operational approach was derived directly from the results of the problem framing. Next, the staff delved into the detailed planning aspect of integrated planning by implementing the MDMP. In this case, the mission received (per the *VA Strategic Plan to Eliminate the Compensation Claims Backlog*) is "The reduction the backlog of compensation claims pending for more than 125 days by the end of 2015."

For the mission analysis, the VA planning staff looked at the mission in depth and exposed pertinent variables and considerations. The staff further identified restrictions and constraints in this step of the MDMP along with critical facts (variables which are known and supportable) and assumptions (variables which are suspected, but not known). Having obtained the information from the received mission, the VA planning staff knew that there was a problem of a claims backlog and that the claims backlog was composed of both new as well as supplemental claims. They also had a commander's initial guidance as well as a design concept from ADM which as guided by the operational approach that directed the VA planning staff to employ human elements, process improvements, as well as technological elements in the course of action. Furthermore the staff had access to Veterans Benefits Administration (VBA) data showing that factors associated with a growing backlog of claims were attributed to increased access to the claims process as well as increased demand for services.[34] Since the VA identified the "organization" as the COG and developed an operational approach directed at different

[33]Department of Veterans Affairs, *VA Strategic Plan to Eliminate the Compensation Claims Backlog Operations* (Washington, DC: Department of Veterans Affairs, January 2013), 3.

[34]Ibid., 4

components of the such, one can make the critical assumption that inefficiencies in those systems of the organization existed.

Given the information at hand, the following Problem Statement was derived: “How do we reduce the claims backlog by 2015, given that there is an increase in access by veterans as well as an increased demand due to the economy, national security strategy, post conflict troop drawdown, and an increased complexity in the claims submitted?” Next, the staff synthesized their mission statement as: “No later than 1 January 2015, the VBA will have no unprocessed claims older than 125 days. The VBA will place processes into action which will ensure the expeditious processing of subsequent claims to ensure that no further backlogs occur.” The staff further identified specified tasks as well as implied tasks. In this example, there is a specified task of reducing the claims backlog to zero by 2015 and implied tasks of improving personnel performance, improving business processes, and the incorporation of technological advances to the claims process. The solution must also sustain the efficient processing of all future claims within 125 days. Next in the mission analysis, the staff had researched all available resources, evaluate resources (and shortfalls), gather information (research) requirements, generate assumptions, and identify key players outside of the organization. The staff was then ready to move forward with the decision making / planning process.

Taking the information gathered in the previous step, the staff was now able to go into developing courses of action. For our example, the monograph will continue with the course of action currently undertaken by the VBA. After reviewing the outputs from the mission analysis, the staff then gathered updated running estimates, assumptions and any new intelligence (data collection) which may have been obtained. For the current course of action taken by the VBA, the planning staff formulated a phased deployment course of action which included a robust concept of operations with specific task organization along the avenues of people, processes, and technology.

Under the "people" oriented avenue of approach, VBA planning staff developed a task organization that proposed segmented lanes for claims processing where claims would be stratified by their complexity into three groups (express, special operations, core).[35] Furthermore, VBA placed emphasis on increased training, as well as the formation of quality review teams. In the "process" avenue of approach, the VBA formulated plans for the reduction of repetition and rework of tasks as well as implemented faster development and testing of these new plans. VBA also planned for new decision support tools in order to increase efficiency and accuracy as well as planned the implementation of a "Disability Benefits Questionnaire" (DBQ) in order to inject further efficiency into the claims process. Finally, under the "technology" avenue of approach, the VBA planned for increased technological applications which would decrease the dependency on paper, increase access, increase automation and decrease variance. The "Veterans Benefits Management System" (VBMS) as well as the DBQ also plays a role in this avenue of approach.

Having developed the above course of action and all of its component parts, the VBA then conducted a COA analysis. Typical with each step of the MDMP, the staff updated running estimates, collected and reviewed new data, and reviewed assumptions. The staff also took pertinent planning guidance into account. Using factual VA data, the COA analysis revealed that under the "people" oriented avenue of approach, segmented lanes would reduce the claims processing process fifty-four days, employee training would enable a 150% increase in claims processed, and Quality Review Teams would further decrease lag time in measuring accuracy from four months to one week. COA analysis further revealed that the "process" avenue of approach would decrease the wait time for a decision on a claim by as much as 35%. Furthermore, implementation of VBMS as well as DBQ would improve accuracy as well as consistency by 9% with DBQ's specifically decreasing the claim processing time by sixteen days.

[35]Ibid., 8

Finally, analysis of the "technology" avenue of approach revealed that the proposed actions would increase performance by 20% and accuracy by 8%. The electronic claims submission aspect of this avenue of approach would reduce claims processing by eighteen days.[36] These actions would also increase efficiency and transparency as well as reduce operating costs by saving on paper, mailing & shipping, copying, and storage expenses thereby archiving an unanticipated implied task.

This hypothetical vignette used actual VA data and plans currently in place in order to show how integrated planning could have been used to come to the course of action they executed. It is a reverse engineering of their current plan used to demonstrate the theoretical applicability of integrated planning. The preceding vignette was an illustration of how a VA planning staff can conceptually frame the environment by understanding both the current state (problem) as well as the envisioned end state (problem resolution). Furthermore, the VA staff framed the problem and commanded an understanding of its components and developed an operational approach to solve this problem. Lastly a detailed course of action (plan) was developed using the MDMP construct.

In the section to follow, Vignette #2, the monograph will use integrated planning to develop a different hypothetical alternate course of action from the scenario above. For consistency, the same data set as well as mission and problem statements will be used; but integrated planning will be utilized to view this problem from a different lens and create a uniquely different COA. This second vignette will demonstrate integrated planning in action as compared to the first vigrnette where integrated planning was used to work a plan (developed ban unknown different approach) aready in place backwards.

---

[36]Ibid., 7-10

Vignette #2: Using integrated planning to develop an alternate course of action for reducing the VA benefits claims backlog.

Using the same mission, "The reduction the backlog of compensation claims pending for more than 125 days by the end of 2015" and data set, this section of the monograph develops an alternate (hypothetical) course of action to reach the desired end state. This vignette demonstrates how a different, unique COA can be developed through the creative versatility of integrated planning given the same scenario. The monograph uses the same guidance and parameters as the previous COA, but the operational approach will differ. Here, the operational approach will be centered on reducing the time it takes to complete "Fully Developed Claims" (FDC's).

For this COA, the VA planning staff utilizes the conceptual planning model, Army Design Methodology, to frame the environment and problem in order to develop an operational approach for a solution (plan). Using the same VA data as the previous vignette, the VA planning staff for this COA also determines that there are problems with internal institutional processing of claims as well as issues with the interaction between the VA and the DoD; furthermore, technological improvements also need to be made.

Further conceptual analysis exposes the center of gravity of the problem to be fully developed claims (FDC). An FDC is a claim which includes all DoD service medical and personnel records, applicable DBQs, any private medical records, and a fully completed claim form. Of the 262 day claims process (average), the completion of FDC's takes 117 days. [37] If the VA's goal is to process claims within 125 days, the completion of FDC's would play a major role. This COA will therefore focus on improving the interaction with the DoD as well as improving internal VA processing of the claims. The operational approach for this COA will therefore be directed at improving processes, improving VA interaction with DoD, and decreasing the time it takes to complete an FDC.

[37]Ibid., 8

Having dissected, and understood the problem as well as the operational approach necessary to reach the desired end state, the VA planning staff can now enter detailed planning (MDMP). For this mission analysis, the staff uses the same problem statement: "How do we reduce the claims backlog by 2015, given that there is an increase in access by veterans as well as an increased demand due to the economy, national security strategy, post conflict troop drawdown, and an increased complexity in the claims submitted?" The mission statement is also constant: "No later than 1 January 2015, the VBA will have no unprocessed claims older than 125 days. The VBA will place processes into action which will ensure the expeditious processing of subsequent claims to ensure that no further backlogs occur." Per the guidance provided by leadership, there is a specified task of reducing the claims backlog to zero by 2015 and implied tasks of improving DoD partnerships as well as improving VA processing of claims.

Now entering the course of action development step of MDMP (detailed planning), the analysis brings together the data and the VA planning staff devises a plan to achieve the desired end state which is feasible, acceptable, complete, and distinguishable from the COA in Vignette #1. Per agreements made with the DoD, "Service, treatment and personnel records for the 300,000 departing Active Duty, National Guard and Reserve Service members will be made available in an electronic format in the near future."[38] This needs to be exploited and brought to fruition as soon as possible. Not only is this a mission sensitive issue, but a public relations sensitive issue as well. In order to streamline this process, the VA should assign department field officers within each service branch headquarters. Using this approach, the VA would have forward deployed operators ensuring that returning service members have their files expeditiously placed into the appropriate data sharing format and into VA databases.

[38]Ibid., 8

Under this COA, the issue of increasing FDC's would be further addressed by streamlining the file acquisition process from private medical providers. A dedicated secure internet, fax, and email network would be set up where outside providers could immediately upload veteran data. The VA would also pay a small stipend to outside physicians and facilities in order to encourage timely submission of veteran health information. An education process also needs to be initiated by the military branches in order to instruct military personnel to request immediate forwarding of all medical information to the VA if they were to see an outside physician post military discharge. The VA also needs to implement a marketing and informational campaign to inform the private medical community that there is a medical information submission process, should they encounter any veterans in their practice. This marketing campaign also has the added benefit of improving the public perception of the VA's efforts to reduce the claims backlog and streamline the claims benefits process.

For this course of action, the VA will further exploit the use of "segmented lanes " for claims processing. This process which classifies claims serves to make VA processing more efficient and capitalizes on the skills of VA employees. Under this paradigm, claims that predictably can take less time will flow through an "express" lane; those taking more time or requiring special handling will flow through a "special operations" lane; and the rest of the claims flow through the "core" lane.[39]

Furthermore, somewhat along the lines of segmented claims, this COA incorporates a line of effort based on the claims distribution by era of conflict as illustrated in Figure 4. As one can see, 24% of the claims backlog is from Iraq and Afghanistan veterans, 23% are Gulf War veterans, and 35% are Vietnam veterans. Per VA data, there are two categories of claims, original (initial) and supplemental. 43% of supplemental claims are from Vietnam-era Veterans and 19%

[39]Ibid., 7

are from Veterans of Iraq and Afghanistan conflicts.[40] Therefore, this means that 57% and 81% of the claims for Vietnam era and Iraq / Afghanistan veterans respectively are new. The data shows the tendency for Vietnam era veterans to be the bulk of the supplemental claims and that Iraq / Afghanistan veterans represent the bulk of the new claims. Data further reveals that 77% of Veterans filing supplemental claims are already receiving some level of compensation from VA. This line of effort therefore calls for an increase in resources aimed at the reduction of original claims. This is due to the fact that original claims represent the bulk of the backlog as well as are correlated with the increased influx of younger soldiers new to the VA system returning from Iraq / Afghanistan conflicts. Since there are more claims coming into the "original" claims class as compared to the "supplemental" claims class, this would make it more probable for them to get backlogged. While supplemental claims are also backlogged, there are less claims flowing into that category, and therefore a decreased demand for resources.

Next, entering the COA analysis, the VA staff wargames the modification of the way claims are processed. VA data shows that obtaining DoD service, treatment, and personnel records will result in a sixty day reduction in claim processing time.[41] Furthermore, VBA projects that the use of "segmented lanes" for claim processing can shorten the process by an additional fifty-four days (on average for all types of claims). Increasing the volume of FDC's via streamlining the file acquisition process from private medical providers is an obvious priority. This is especially true since receiving private medical files will invariably result in a decrease in time for claims to be complete. Since FDC's are the "center of gravity" for the clams backlog problem, even a marginal increase in the percentage of claims process with have algorhythmic effects in shortening the number of days it takes to process claims. Tied to this, a simple 20%

---

[40]United States Department of Veterans Affairs, *"2014 Monday Morning Workload Reports,"* March 8, 2014, http://www.vba.va.gov/reports/mmwr (accessed March 8, 2014).

[41]Department of Veterans Affairs, 6-7.

increase in FDC's will result in an additional eighteen day reduction in the time it takes to complete these claims.[42]

The fifth step of the MDMP, COA Comparison, evaluates the COAs against each other (as the name implies). The monograph here will compare the COA from Vignette #1 (COA 1) to the COA developed in this vignette (COA 2). The evaluation criteria will be days to claim completion, cost, and manpower costs. The evaluation criteria will be measured in days of processing reduced, size of financial investment, and manpower size and commitment. The first COA provides a 201 day reduction in the claims process as while COA 2 represents a 132 day reduction in the claims process. Both COAs require a significant investment by the VA in technology as well as employee training. Both COAs involve changes in VA processes, albeit in different ways. COA 2 has an additional public perception benefit due to the marketing campaign associated with it. Both COAs work within the current workforce structure (no hiring of new staff), but COA 2 calls for claims processing staff to redirect efforts towards "original" claims from Iraq / Afghanistan veterans. Figure 6 below presents this in a decision matrix layout which will make comparison easier.

[42]Ibid., 8

| COA | 1 | 2 |
|---|---|---|
| Advantages | - Claims processing reduced by 201 days.<br>- Involves multiple VA branches (Employee education, technology, and process improvement) | - Claims processing reduced by 132 days.<br>- Marketing campaign hill help improve public perception of VA's commitment to reduce the claims backlog.\ Involves multiple VA branches (Employee education, technology, and process improvement) |
| Disadvantages | - Requires significant investment in staff training.<br>- Requires investment in technology related upgrade costs. | - Difficult to get "buy in" from external medical providers.<br>- Requires investment in technology related upgrade costs.<br>- May be difficult to change staff allocation of tasks.<br>- May induce "push back" from Vietnam veterans groups if they feel that preferential treatment is being given to Iraq / Afghanistan veterans by the VA. |

Figure 6: COA Comparison Decision Matrix

*Source*: Created by Author

After comparing the COAs, the Chief of Staff would make a decision as to which COA best accomplishes the mission. The decision maker could pick either COA, or pull out aspects from each and have the planning staff design a composite COA, wargame it out and implement this composite COA if deemed better suited to accomplish the mission. The Chief of Staff can also make adjustments or changes to the selected COA to better fit the purpose. For this step of the MDMP, the VA staff again produces a refined commander's intent as well as employs updated intelligence and assumptions (if any).

Entering step 7 of the MDMP, the VA staff can finally produce the mission orders. As previously discussed, the civilian sector (VA) does not use orders as the military does. An analogue to orders production would be the production of an initiative, a directive, or an updated SOP. The VA staff will implement the designed plan and will continuously assess the results and

report back to the decision maker. The staff needs to be in a constant assessment and reframing mode in order to catch any deficiencies early on and measure the success of the operation or provide corrective action.

The second vignette demonstrates that utilizing integrated planning, the VA planning staff can view the same problem from a different lens and apply its tenets to generate a uniquely different course of action. Vignette #2 also shows how the problem, with its variables kept constant, was framed differently with a uniquely identified center of gravity and yet the same desired end state was achieved. Lastly, the COA comparison performed at the end of Vignette #2 reflects the ability of the VA planning staff to use the MDMP to fairly assess and identify a preferred course of action from a diverse set of available options.

As demonstrated by the hypothetical vignettes above, the VA can readily apply integrated planning to the administrative setting to their advantage. The Army Design Methodology and the MDMP can be used to evaluate systems already in place as well as to develop alternate courses of action. Finally, these concepts are applicable to the solution of new problems as they arise and synthesize multiple courses of action from which to choose from. Integrated planning should be harnessed by the VA as the methodology of choice for the understanding of, and ultimately, the resolution of problems or initiatives.

## PURPOSEFUL CHANGE

> "The team that became great didn't start off great - it learned how to produce extraordinary results."
>
> -Peter M. Senge, *The Fifth Discipline: the Art and Practice of the Learning Organization*[43]

The adoption of a new decision making and planning model borrowed from the U.S. Army may not come naturally to the VA, regardless of what benefits may be touted. In order for new ideas to "gain traction", there must be unity of purpose, vision and identity between the employees and the institution for which they work, in this case, the VA. It is this unified vision, the sense which drives the personal work ethic of the individual and ultimately feeds into the ethic of the institution, which in turn helps attain goals for the greater good and the fulfillment of its mission statement. As stated by Peter Senge: "When there is a genuine vision (as opposed to the all-to-familiar "vision statement"), people excel and learn, not because they have to, but because they want to."[44] Those employed by the Department of Veterans Affairs need to be a part of a culture which has a common identity as well as a common sense of purpose. This culture is not absent from the agency, yet these values need to be promoted so as to foster an attitude which would be more receptive to change. Change is therefore seen as implemented for the greater good of the organization and the population which the organization serves.

The institution must therefore possess inherent core values conducive to the fulfillment of the mission statement which defines its purpose.[45] The VA's mission statement clearly reflects these core values, and VA employees' agency-wide embrace their sense of purpose to serve our nations' veterans yet "change" is often difficult to implement. Receptiveness to change is the

---

[43]Peter M. Senge, *The Fifth Discipline: the Art and Practice of the Learning Organization*, rev. ed. (New York: Doubleday, 2006), 4.

[44]Ibid., 9

[45]Sullivan and Harper, 89

bridge necessary for the achievement of shared identity and sense of purpose. This is key in order for the adoption of integrated planning by the VA to achieve and maintain traction amongst all stakeholders. These shared core values serve to form an identity for the institution as well as for its members. It is this common shared sense of purpose which serves as the bond between the individual and the institution. As General Gordon R. Sullivan notes in his book *Hope is Not a Method: What Business Leaders Can Learn from America's Army*, "People who belong to an organization with a strong sense of purpose can identify themselves with that purpose."[46] Having this unity of identity enables the individual to stop thinking of themselves in their immediate role and allows them to see their role in achieving the institutional goals. A personal sense of purpose is further encouraged, and even more institutional progress is made. By having a common shared purpose and identity, all members in turn have a shared understanding of the intended goals.

It is essential to have clear, concise communication which leads to common shared understanding that will in turn foster cooperation in carrying out decisions made by those in leadership. Actions by individuals who make up an institution based on decisions made by those in leadership are the results of this shared understanding as well as shared organizational identity as well as the sense of purpose which encourages the envisioning of the common goal. As described by Peter M. Senge: "If any one idea about leadership has inspired organization for thousands of years, it's the capacity to hold a shared picture of the future we seek to create."[47]

It is with this in mind that individuals will be motivated to put aside their personal preferences as well as their interpretations of the potential consequences of their action and trust on the judgment of the leadership. Trust is based on mutual respect, but is also embedded in the

[46]Ibid., 91-92

[47]Senge, 9

common shared values and identity of the leadership as well as the individuals acting out the direction.[48]

Purpose and identity are important in both the application of integrated planning into the VA as well as for its adoption into VA culture. Integrated planning is both a top down as well as a bottom up rational process since collaboration is encouraged at all levels. Sharing both identity with the organization as well as purpose, individuals are united in a shared vision towards a common goal. Integrated planning promotes interaction between stakeholders at all levels as well as problem solving in a rational manner. Decisions and plans made by following SOPs and adherence to policies stiffen creativity and do not allow for flexibility in dealing with emergent situations and problems. Planning based on rational decision making on the other hand requires thought as well as understanding of alternative decisions and associated consequences.[49] By eliminating rules based decision making, and encouraging rational decision making, not only does this allow for improved, well thought out decisions and planning, but it also feeds into the unity of goals and identity between planning staff and those in leadership. The author James G. March expanded on the concept of leaders, individuals, and organizations (institutions) in his book *Primer On Decision Making: How Decisions Happen*. He presents the "The Logic of Appropriateness," where rules based decision making is different from rational decision making and is based upon one's recognition of the organizations goals and identity. This then ties into the individual actor's situational awareness and assists them in making the appropriate decision. Once the decision is made, rule followers act more willingly on the decision made by the individual in leadership based on their shared identity (both individual and organizational).[50]

---

[48]Jamshid Gharajedaghi, *Systems Thinking: Managing Chaos and Complexity: a Platform for Designing Business Architecture*, 2nd ed. (Boston, MA: Butterworth-Heinemann, 2006), 56.

[49]James G. March, *How Decisions Happen in Organizations*, 97

[50]James G. March, *Primer On Decision Making: How Decisions Happen*, 58-62

This shared identity will facilitate change in the VA and the adoption of a new decision making process.

## CONCLUSION

This monograph described the U.S. Army's method for integrated planning and gave a brief history of its evolution. The Army Design Methodology represents the conceptual component of planning whereas the MDMP demonstrates the detailed component of planning which together make up integrated planning. The vignettes demonstrated the applicability of integrated planning, to the Department of Veterans Affairs. Together, they provide a robust framework from which to create courses of action to remedy to almost any administrative scenario in any section of the VA. This document also revealed how integrated planning not only allows, but encourages participation by all stakeholders' at all organizational levels.

Integrated planning represents a more rational decision making and planning model by the nature of its analytical conceptual components as well as its detailed aspect. If the VA staff truly has shared values, identity, and purpose, rational planning and decision making will result in more creative and robust solutions for emergent problems. In being rational, integrated planning helps stakeholders act less as individuals acting in a role and more like parts of a collective, all striving towards common shared goal, thus achieving technical efficiency.[51]

The monograph presented the concepts of institutional purpose and identity and how these concepts are important to incorporate into the culture of the VA in order to help its stakeholders better achieve its mission. Change is often difficult to achieve within an organization, especially when implementing a new process. Peter M. Senge states that: "Most large corporations, even the most successful ones, live half as long as a person; multiple studies

[51]James G. March and John P. Olsen, "The Logic of Appropriateness," *ARENA Working Papers.* (Oslo: University of Oslo Press, 2009), 4.

confirm that most corporations last less than forty years, less than half the life expectancy of an adult."[52] The VA is not a typical organization and although it has corporate attributes, it must not and cannot fall victim to this same paradigm. The VA and its employee stakeholders need to be constantly evolving, being agile and adaptable as an organization in order to "change with the times" and face new challenges.

Integrated planning equips Army leaders with the ability to thoroughly understand problems and provide clear, concise options or logical solutions. This ability is not limited to the military. The need for the formation of executable plans and orders is universal to all organizations, may they be civilian or military. The clarity and efficiency of Army Design Methodology and the Military Decision Making Process along with the encouragement of collaborative work throughout all levels of the organization can very well make the integrated planning the unifying methodology for planning and decision making within the United States Department of Veterans Affairs.

[52]Senge, 17

BIBLIOGRAPHY

Bar-Yam, Yaneer. *Making Things Work: Solving Complex Problems in a Complex World*. Cambridge, MA: NECSI, Knowledge Press, 2004.

Cojocar, William J. "Adaptive Leadership in the Military Decision Making Process." *Military Review* 15 (June 2012): 23.

Conklin, E Jeffrey. *Dialogue Mapping: Building Shared Understanding of Wicked Problems*. Chichester, England: Wiley, 2006.

Clausewitz, Carl von, trans. *On War, Indexed Edition.* Reprint ed. Translated by Michael Howard and Peter Paret. Princeton, NJ: Princeton University Press, 1989.

Department of the Army, Army Doctrinal Publication 5-0 (ADP 5-0). *The Operations Process*. Washington, DC: Department of the Army. May 2012.

_____. Army Doctrine Reference Publication 5-0 (ADRP 5-0). *The Operations Process*. Washington, DC: Department of the Army. May 2012.

_____. Army Tactics, Techniques, and Procedures 5-0.1 (ATTP 5-0.1). *Commander and Staff Officer Guide.* Washington, DC: Department of the Army. September 2011.

_____. Army Field Manual 5-0 (FM 5-0). *The Operations Process*. Washington, DC: Department of the Army. March 2010.

_____. Army Field Manual 5-0 (FM 5-0). *Army Planning and Orders Production*. Washington, DC: Department of the Army. January 2005.

_____. Army Field Manual *101-5 (FM 101-5).* Washington, DC: Department of the Army, May 1997.

Department of Defense, Joint Publication 1-02 (JP 1-02). *Department of Defense Dictionary of Military and Associated Terms.* Washington, DC: Department of Defense, November 2010.

Department of War, Army Field Manual 101-5 (FM 101-5). *Staff Officers' Field Manual and the Staff and Combat Orders*. Washington, DC: Department of War, August 1940.

_____. Army Field Manual FM 101-5 (FM 101-5) *Staff Officers' Field Manual, Part I.* Washington, DC: Department of War, 1932.

Department of Veterans Affairs, *VA Strategic Plan to Eliminate the Compensation Claims Backlog Operations*. Washington, DC: Department of Veterans Affairs, January 2013.

Gharajedaghi, Jamshid. *Systems Thinking: Managing Chaos and Complexity: a Platform for Designing Business Architecture*. 2nd ed. Boston, MA: Butterworth-Heinemann, 2006.

Hodge, George. “Wargaming Courses of Action During Other-than-major Combat Operations.” *Small Wars Journal* (June 22, 2012): 1. http://smallwarsjournal.com/jrnl/art/wargaming-courses-of-action-during-other-than-major-combat-operations (accessed March 30, 2014).

Jasper, Melanie, and Mansour Jumaa, eds. *Effective Healthcare Leadership*. Malden, MA: Wiley-Blackwell, 2005.

Kober, Erik K. “Bridging the Planning Gap: Linking Conceptual Army Design to Military Decision-Making.” Monograph, School of Advanced Military Studies, AY 2010-2011.

Lorenzi, Nancy M., and Robert T. Riley. “Managing Change an Overview.” *Journal of the American Medical Informatics Association* 7, no. 2 (March-April 2000): 1. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC61464/ (Accessed April 17, 2014).

March, James G. “How Decisions Happen in Organizations.” *Human-Computer Interaction* 6 (1991): 97.

March, James G. *Primer On Decision Making: How Decisions Happen*. New York: Free Press, 2009.

March, James G., and John P. Olsen. “The Logic of Appropriateness.” *ARENA Working Papers* (04/2009).

Marr, John J. “The Military Decision Making Process: Making Better Decisions Versus Making Decisions Better.” Monograph, School of Advanced Military Studies, AY 2000-2001.

Mintzberg, Henry. *Power in and Around Organizations*. Princeton, NJ: Prentice-Hall Inc, 1983.

Nawoichyk, John D. “MDMP: One Tool in the Commander’s Tool Chest.” *Army Logistician* 40 (September-October 2008): 18-20.

Otero, Christopher. “Reflections On Clausewitz and Jomini: A Discussion On Theory, MDMP, and Design in the Post OIF Army.” *Small Wars Journal* (May 25, 2011): 1-2. http://smallwarsjournal.com/blog/journal/docs-temp/772-otero.pdf (accessed April 3, 2014).

Schon, Donald A. *The Reflective Practitioner: How Professionals Think in Action.* Aldershot: Basic Books, 1984.

Senge, Peter M. *The Fifth Discipline: the Art and Practice of the Learning Organization*. Rev. ed. New York: Doubleday, 2006.

Strange, Joseph L. “Centers of Gravity and Critical Vulnerabilities: Building On the Clausewitzian Foundation so That We Can All Speak the Same Language.” *Marine Corps University Perspectives on Warfighting* 4, no. 2 (1996): 43.

Strange, Joseph L., and Richard Iron. “Center of Gravity What Clausewtiz Really Meant.” *Joint Forces Quarterly* no. 35 (Summer 2003): 22-23. http://www.dtic.mil/dtic/tr/fulltext/u2/a520980.pdf (accessed April 15, 2014).

Sullivan, Gordon R., and Michael V. Harper. *Hope Is Not a Method: What Business Leaders Can Learn from America's Army*. New York: Crown Business, 1997.

United States Department of Veterans Affairs. “2013 Monday Morning Workload Reports.” November 13, 2013. http://www.vba.va.gov/reports/mmwr/ (accessed November 13, 2013).